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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF TENNESSEE		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	Chapter 11	
	Chapter 12	
	Chapter 13	Check if this amended filir

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Patricia First name Ann Middle name Escobar Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	FKA Patricia Ann Gamble	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8107	

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Debtor 1 Patricia Ann Escobar

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		✓ I have not used any business name or EINs. Business name(s)	I have not used any business name or EINs. Business name(s) EINs		
		LING	LINS		
5.	Where you live	1592 Hawk Lane	If Debtor 2 lives at a different address:		
		Seymour, TN 37865 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Sevier County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	_ Cha	apter 7					
		_ Cha	apter 11					
		_ Cha	apter 12					
		✓ Cha	apter 13					
8.	How you will pay the fee	a	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.					
					Illments. If you choose this option (Official Form 103A).	n, sign and attach the Application for Individuals to Pay		
			request that ut is not requ	my fee be wai	ved (You may request this option our fee, and may do so only if you	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that		
						ninstallments). If you choose this option, you must fill out ial Form 103B) and file it with your petition.		
).	Have you filed for bankruptcy within the last 8 years?	✓ No. Yes						
	,		District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is	✓ No Yes						
	not filing this case with you, or by a business partner, or by an affiliate?							
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	No.	Go to li	ne 12.				
	residence?	✓ Yes	. Has yo	ur landlord obtai	ned an eviction judgment agains	t you?		
			✓	No. Go to line 1	2.			
				Yes. Fill out Init	ial Statement About an Eviction J	Judgment Against You (Form 101A) and file it with this		

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Debtor 1 Patricia Ann Escobar

ar	Report About Any Bu	sinesses	You Own as a Sole Proprietor
2.	Are you a sole proprietor of any full- or part-time business?	✓ No.	Go to Part 4.
		Yes.	Name and location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code
	it to this petition.		Check the appropriate box to describe your business:
			Health Care Business (as defined in 11 U.S.C. § 101(27A))
			Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
			Stockbroker (as defined in 11 U.S.C. § 101(53A))
			Commodity Broker (as defined in 11 U.S.C. § 101(6))
			None of the above
3.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines operation	e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate s. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of his, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure s.C. 1116(1)(B).
		✓ No.	I am not filing under Chapter 11.
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	☐ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
		Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
ar	t 4: Report if You Own or	Have Any	Hazardous Property or Any Property That Needs Immediate Attention
4.	Do you own or have any	√ No.	
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	Yes.	What is the hazard?
public health or safety? Or do you own any property that needs			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Patricia Ann Escobar

Case number (if known)

15.	Tell the court whether
	you have received a
	briefing about credit
	counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

Explain Your Efforts to Receive a Briefing About Credit Counseling

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

_ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Main Document Page 6 of 48 Case number (if known) Debtor 1 Patricia Ann Escobar Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. ✓ Yes. Go to line 17. Are your debts primarily business debts? Business debts are debts that you incurred to obtain 16b. money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under √ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will Yes be available for distribution to unsecured creditors? 18. How many Creditors do **√** 1-49 1,000-5,000 25,001-50,000 you estimate that you 50-99 5001-10,000 50,001-100,000 owe? 100-199 10,001-25,000 More than 100,000 200-999 How much do you \$500,000,001 - \$1 billion \$0 - \$50,000 \$1,000,001 - \$10 million estimate your assets to \$50,001 - \$100,000 \$10,000,001 - \$50 million \$1,000,000,001 - \$10 billion be worth? \$100,001 - \$500,000 \$50,000,001 - \$100 million \$10,000,000,001 - \$50 billion \$500,001 - \$1 million \$100,000,001 - \$500 million More than \$50 billion 20. How much do you \$0 - \$50,000 \$1,000,001 - \$10 million \$500,000,001 - \$1 billion estimate your liabilities \$50,001 - \$100,000 \$10,000,001 - \$50 million \$1,000,000,001 - \$10 billion to be? \$100,001 - \$500,000 \$50,000,001 - \$100 million \$10,000,000,001 - \$50 billion \$500,001 - \$1 million \$100,000,001 - \$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Signature of Debtor 2

MM / DD / YYYY

Executed on

/s/ Patricia Ann Escobar

April 23, 2018

MM / DD / YYYY

Patricia Ann Escobar Signature of Debtor 1

Executed on

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Debtor 1 Patricia Ann Escobar

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Zachary S. Burroughs /s/ David R. Houbre	Date	April 23, 2018
Signature of Attorney for Debtor	_	MM / DD / YYYY
Zachary S. Burroughs 025896 David R. Houbre 029221 Printed name		
Clark & Washington, L.L.C.		
408 S. Northshore Drive Knoxville, TN 37919		
Number, Street, City, State & ZIP Code Contact phone 865-281-8084	Email address	cwknoxville@cw13.com
025896; State of Tennessee	Linaii addiess	CWRIOXVIIIE@CW 13.COIII
029221; State of Tennessee Bar number & State		

Certificate Number: 03621-TNE-CC-030923245



CERTIFICATE OF COUNSELING

I CERTIFY that on April 23, 2018, at 3:24 o'clock PM EDT, Patricia Escobar received from Credit Card Management Services, Inc. d/b/a Debthelper.com, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of Tennessee, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

April 23, 2018 By: /s/Kenslande Jeanbart Date:

> Title: Credit Counselor

Name: Kenslande Jeanbart

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

		nation to identify you								
De	btor 1	Patricia Ann Esc First Name	Middle Name	Last Name						
	btor 2									
(Sp	ouse if, filing)	First Name	Middle Name	Last Name						
Un	ited States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	TENNESSEE						
	se number				_	Check if this is an mended filing				
St Be info	as complete a	of Financial	attach a separate sheet to	are filing together, both are	eankruptcy equally responsible for sup y additional pages, write you					
			arital Status and Where You	Lived Before						
1.	What is your	your current marital status?								
	□ Married■ Not married	ried								
2.	During the la	ring the last 3 years, have you lived anywhere other than where you live now?								
	■ No □ Yes. List	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	ı.					
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there				
3. stat					ity property state or territor ico, Texas, Washington and V					
Pa		ke sure you fill out <i>Scf</i>	nedule H: Your Codebtors (O	fficial Form 106H).						
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?				
	□ No									
	Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$16,356.43	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

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		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calen (January 1 to	dar year: December 31, 2017)	■ Wages, commissions, bonuses, tips	\$45,726.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
For the calend (January 1 to	dar year before that: December 31, 2016)	■ Wages, commissions, bonuses, tips	\$42,004.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
and other winnings. List each s	public benefit payments If you are filing a joint ca	ther that income is taxable. Exact; pensions; rental income; interacts and you have income that you have from each source separa	rest; dividends; money collec you received together, list it o	ted from lawsuits; royalties; an nly once under Debtor 1.	d gambling and lottery
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	dar year before that: December 31, 2016)	401(k) Liquidation	\$37,157.00		
	Debtor 1's or Debtor Neither Debtor 1 nor	u Made Before You Filed for 2's debts primarily consume Debtor 2 has primarily consu a personal, family, or househo	r debts? umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	1(8) as "incurred by an
	During the 90 days be No. Go to line	fore you filed for bankruptcy, di 7.	id you pay any creditor a total	of \$6,425* or more?	
	paid that on the control of the cont	reach creditor to whom you pai creditor. Do not include paymer e payments to an attorney for th nt on 4/01/19 and every 3 year	nts for domestic support oblig his bankruptcy case.	ations, such as child support a	and alimony. Also, do
Yes.		or both have primarily consu		of \$600 or more?	
	□ No. Go to line	7			
	Yes List below include pa	 each creditor to whom you pai ayments for domestic support or br this bankruptcy case. 			

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	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for			
	Toyota Financial Services PO Box 9786	2/2018 - 3/2018	\$1,188.00	\$25,302.00	☐ Mortgage	ı			
	Cedar Rapids, IA 52409-0004				☐ Credit Ca	ırd			
					■ Loan Rep				
					☐ Suppliers	•			
					☐ Other				
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.								
	No								
	Yes. List all payments to an insider.								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment			
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	iny property on a	ccount of a de	ebt that benefited an			
	No								
	☐ Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name			
Pa	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures							
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.								
	□ No								
	Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency		Status of th	e case			
	University Health System dba	Civil	Knox County G	Seneral	■ Pending				
	University of Tennessee Medical		Sessions Cour		PendingOn appe	al			
	Center v. Patricia A. Gamble		Attn Wanda		☐ Conclude				
	108504H		300 Main Stree Knoxville, TN 3						
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	shed, attached	l, seized, or levied?			
	No. Go to line 11.								
	☐ Yes. Fill in the information below.								
	Creditor Name and Address	Describe the Property		Date		Value of the			

Explain what happened

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Address

Email or website address

CIN Legal Data Services

3430 Honeywell Ct

Dayton, OH 45424 www.cinlegal.com

\$35.00; credit counseling and debt

management courses

transferred

payment

\$35.00

Person Who Made the Payment, if Not You

or transfer was

made

4/23/18

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Debtor 1 Patricia Ann Escobar

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.							
	☐ Yes. Fill in the details.							
	Person Who Was Paid Address	Description and v transferred	alue of any proper	ty Date payment or transfer was made	Amount of payment			
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your I Include both outright transfers and transfers minclude gifts and transfers that you have alreated No	business or financial affa nade as security (such as t	airs? he granting of a sec					
	Yes. Fill in the details.							
	Person Who Received Transfer Address		Description and value of property transferred Describe any property or payments received or debts					
	Person's relationship to you			paid in exchange				
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.							
	Name of trust	Description and v	alue of the proper	ty transferred	Date Transfer was made			
Pai	t 8: List of Certain Financial Accounts, Ir	nstruments. Safe Deposit	Boxes, and Stora	ge Units				
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No Yes. Fill in the details.	or other financial accour	nts; certificates of	-				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details.	year before you filed for	bankruptcy, any s	afe deposit box or other dep	pository for securities,			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S		scribe the contents	Do you still have it?			
22.	State and ZIP Code) Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		scribe the contents	Do you still have it?			

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Debtor 1 Patricia Ann Escobar

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No	Pai	t 9: Identify Property You Hold or Control for S	Someone Else			
Yes. Fill in the details. Owner's Name Address (humber, Street, City, State and ZIP Code) Where is the property? Reamber, Street, City, State and ZIP Code) Reamber of a limited liability company (LLC) or limited liability partnership (LLP) Reamber of a limited liability portnership (LLP) Reamber of a limited liability company (LLC) or limited liability partnership (LLP) Reamber of a limited liability portnership (LLP) Reamber of a limited liability company (LLC) or limited liability partnership (LLP) Reamber of a limited liability company (LLC) or limited liability partnership (LLP) Reamber of a limited liability company (LLC) or limited liability partnership (LLP) Reamber of a limited liability company (LLC) or limited liability partnership (LLP) Reamber of a limited liability company (LLC) or limited liability partnership (LLP) Reamber of a limited liability company (LLC) or limited liability partnership (LLP) Reamber of a limited liability company (LLC) or limited liability partnership (LLP) Reamber of a limited liability company (LLC) or limited liability partnership (LLP) Reamber of a limited liability company (LLC	23.		ne else owns? Include any prop	erty y	ou borrowed from, are storing for	r, or hold in trust
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Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Street, City, State and ZIP Code) (Name of site Address (Number, Stree		Yes. Fill in the details.				
Ervironmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Size means any location, facility, or properly as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes, Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number			(Number, Street, City, State and ZIP	De	escribe the property	Value
Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material.	Pai	t 10: Give Details About Environmental Informa	ition			
toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Sike means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. No	For	the purpose of Part 10, the following definitions	apply:			
to own, operate, or utilize it, including disposal sites. **Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. *Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? **No** No** Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, St		toxic substances, wastes, or material into the ai	r, land, soil, surface water, grou	_	• •	
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24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Peart 113 Give Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership		, ,		us wa	aste, hazardous substance, toxic s	substance,
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State an	Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of who	en th	ey occurred.	
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No	24.	Has any governmental unit notified you that you	may be liable or potentially liab	le un	der or in violation of an environme	ental law?
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business The Address (Number any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership						
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Name Address (Number, Street, City, Street, City, Street, City, State and ZIP Code) Name Address (Number, Street, City, Street, City, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership			Address (Number, Street, City, State a	and		Date of notice
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Part11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? □ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP)	25.	Have you notified any governmental unit of any	release of hazardous material?			
Name of site Address (Number, Street, City, State and ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Case Number Case Details About Your Business or Connections to Any Business The properties of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership Date of notice know it Environmental law, if you know it Name before, Street, City, State and ZIP Code) Date of notice know it Environmental law, if you know it Name benove it is possible for said and orders. Environmental law, if you know it Name know it Nature of the case Status of the case Status of the case Status of the case Status of the case Absure of the case Status of the case Status of the case About Your Business or Connections to Any Business The properties of the case of the cas		■ No				
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No Yes. Fill in the details. Case Title			Address (Number, Street, City, State a	and		Date of notice
☐ Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership	26.	Have you been a party in any judicial or adminis	trative proceeding under any en	viron	mental law? Include settlements	and orders.
Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership		■ No				
Case Number Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership		☐ Yes. Fill in the details.				
Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? \[\begin{align*} \text{A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time} \[\begin{align*} \text{A member of a limited liability company (LLC) or limited liability partnership (LLP)} \[\begin{align*} \text{A partner in a partnership} \]			Name Address (Number, Street, City,	Na	ature of the case	
□ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □	Pai	t 11: Give Details About Your Business or Coni	·			
□ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □	27.	Within 4 years before you filed for bankruptcy.	lid you own a business or have a	anv o	f the following connections to any	/ husiness?
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership —		<u> </u>	•	-	-	, 2000001
☐ A partner in a partnership				•	•	
		_	(===) or minica hability partiters	p (I	 - ,	
			ive of a corporation			

lacksquare An owner of at least 5% of the voting or equity securities of a corporation

Case 3:18-bk-31272-SHB Doc 1 Filed 04/25/18 Entered 04/25/18 08:30:33 Main Document Page 15 of 48 Debtor 1 Patricia Ann Escobar Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Patricia Ann Escobar Signature of Debtor 2 Patricia Ann Escobar Signature of Debtor 1 Date Date April 23, 2018

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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		Maill Down	mem Page 10 or	40	
Fill in this infor	mation to identify your	case:			
Debtor 1	Patricia Ann Esc	obar			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF TENNESSEE		
Case number (if known)					☐ Check if this is an
					amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	127,141.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	127,141.00
Par	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	25,302.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	15,903.00
	Your total liabilities	\$	41,205.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,153.42
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,573.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Vour dabts are primarily consumer dabts. Consumer dabts are those "incurred by an individual primarily for		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Patricia Ann Escobar

Page 17 of 48 Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,924.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

				cument Page 18 of 48	3	
Fill in	n this inforn	nation to identify your	case and this filing:			
Debt	or 1	Patricia Ann Esc	obar			
		First Name	Middle Name	Last Name		
Debt	or 2 se, if filing)	First Name	Middle Name	Last Name		
` '						
Unite	ed States Ba	nkruptcy Court for the:	EASTERN DISTRIC	T OF TENNESSEE		
Case	number					☐ Check if this is an
						amended filing
∩ffi	icial Fo	rm 106A/B				
<u>5c</u>	neaui	e A/B: Prop	erty			12/15
think i inform Answe	t fits best. Be action. If more er every ques	e as complete and accurse space is needed, attachtion.	ate as possible. If two m a separate sheet to this	nly once. If an asset fits in more than or arried people are filing together, both ar s form. On the top of any additional page	e equally responsible for s	upplying correct
Part 1	Describe	Each Residence, Building	g, Land, or Other Real E	state You Own or Have an Interest In		
1. Do	you own or h	nave any legal or equitabl	e interest in any resider	ice, building, land, or similar property?		
_	No. Go to Pari					
_						
ч	res. where is	s the property?				
Part 2	Describe	Your Vehicles				
		ucks, tractors, sport u	tility vehicles, motoro	eycles		
3.1	Make:	Toyota	Who has an	interest in the property? Check one		claims or exemptions. Put
0.1	_	RAV4	■ Debtor 1 o			red claims on Schedule D: nims Secured by Property.
	_	2016	Debtor 2 d	•	Current value of the	Current value of the
	Approximate	e mileage: 41	,000 Debtor 1 a	and Debtor 2 only	entire property?	portion you own?
	Other inforn	nation:	At least or	ne of the debtors and another		
			Check if to	this is community property	\$19,075.00	\$19,075.00
Exa □ 5 Ac .pa	Amples: Boat No Yes dd the dolla ages you ha Describe	ts, trailers, motors, pers or value of the portion ove attached for Part 2	onal watercraft, fishing you own for all of you . Write that number h	ur entries from Part 2, including any ere	r entries for	\$19,075.00 Current value of the portion you own? Do not deduct secured
						claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Dobtor 1		ok-31272-SHB Doc 1 Filed 04/25/18 Entered 04/25 Main Document Page 19 of 48	
Debtor 1	Patricia Ann	Escobar Case number	(If Known)
■ Yes	s. Describe		
		Bedroom furniture, kitchen utensils	
		Debtor lives with mother, and most of the household furnishings belong to her.	\$1,000.00
□ No	ples: Televisions a	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners I phones, cameras, media players, games	s; music collections; electronic devices
		2 TVs, DVD player, stereo system	\$600.00
Exam _l ■ No		I figurines; paintings, prints, or other artwork; books, pictures, or other art objects; sta ons, memorabilia, collectibles	amp, coin, or baseball card collections;
Exam _i ■ No	ment for sports a ples: Sports, photo musical instr	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
■ No		s, shotguns, ammunition, and related equipment	
□ No		othes, furs, leather coats, designer wear, shoes, accessories	
		Personal clothing	\$250.00
□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches	s, gems, gold, silver
		Personal jewelry	\$200.00
Exan □ No	farm animals nples: Dogs, cats, s. Describe	birds, horses	
		1 cat No cash value	\$0.00
■ No	other personal an	d household items you did not already list, including any health aids you did r	not list

Official Form 106A/B Schedule A/B: Property page 2

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Debtor 1	Patricia Ann Escoba	Mai r	in Document Page 20 of 48 Case number (if known)	
			Part 3, including any entries for pages you have attached	\$2,050.00
Part 4: De	scribe Your Financial Assets			
Do you ov	vn or have any legal or eq	uitable interest ir	n any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	oles: Money you have in yo	-	ome, in a safe deposit box, and on hand when you file your petiti	on
			Cash	\$8.00
Exam _i □ No	institutions. If you hav		counts; certificates of deposit; shares in credit unions, brokerage is with the same institution, list each. Institution name: First Tennessee Bank	nouses, and other similar
-	17.1.			
	17.2.	Savings	Knoxville TVA Employees Credit Union	\$5.00
Examp ■ No □ Yes 19. Non-pu joint v ■ No	ublicly traded stock and inventure Give specific information a	nt accounts with brustitution or issuer nterests in incorpubout them	oorated and unincorporated businesses, including an interes	t in an LLC, partnership, and
Negoti Non-n ■ No	nment and corporate bon- iable instruments include pe egotiable instruments are the Give specific information a	ersonal checks, ca nose you cannot tra	% of ownership: otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
Examp □ No □	ment or pension accounts oles: Interests in IRA, ERIS	s A, Keogh, 401(k), 4	403(b), thrift savings accounts, or other pension or profit-sharing	plans
■ Yes.	List each account separate Type o	lly. f account:	Institution name:	
	401(k))	401(k) Account through Employer	\$106,000.00
Your s Examp ■ No		you have made s	o that you may continue service or use from a company , public utilities (electric, gas, water), telecommunications compar Institution name or individual:	nies, or others

Official Form 106A/B Schedule A/B: Property page 3

Case 3:18-bk-31272-SHB Doc 1 Filed 04/25/18 Entered 04/25/18 08:30:33 Main Document Page 21 of 48 Case number (if known) Debtor 1 Patricia Ann Escobar 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits, unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Surrender or refund

Company name: Beneficiary:

value:

Term Life Insurance Policy through Employer

No cash value

Derrick Gamble and Tvler Gamble

\$0.00

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

☐ Yes. Give specific information...

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Main Document Page 22 of 48 Case number (if known) Debtor 1 Patricia Ann Escobar 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$106,016.00 for Part 4. Write that number here..... Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$19,075.00 Part 3: Total personal and household items, line 15 57. \$2,050.00 58. Part 4: Total financial assets, line 36 \$106,016.00

59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$127,141.00 Copy personal property total \$127,141.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$127,141.00

Official Form 106A/B Schedule A/B: Property page 5 Case 3:18-bk-31272-SHB Doc 1 Filed 04/25/18 Entered 04/25/18 08:30:33 Des

		WHAT BOOK	mem rade za or	70
Fill in this infor	rmation to identify your	case:		
Debtor 1	Patricia Ann Esco	obar		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT O	OF TENNESSEE	
Case number				
(II KIIOWII)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you clain	ning?	Check one only	, even if y	your spouse is	filing with y	ou.
----	---------------------------------------	-------	----------------	-------------	----------------	---------------	-----

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Bedroom furniture, kitchen utensils	\$1,000.00		\$1,000.00	Tenn. Code Ann. § 26-2-103
Debtor lives with mother, and most of the household furnishings belong to her. Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
2 TVs, DVD player, stereo system Line from Schedule A/B: 7.1	\$600.00		\$600.00	Tenn. Code Ann. § 26-2-103
Line IIoiii Scredule A/B. 7.1			100% of fair market value, up to any applicable statutory limit	
Personal clothing Line from Schedule A/B: 11.1	\$250.00		\$250.00	Tenn. Code Ann. § 26-2-104
Zino nom constato 702. TTT			100% of fair market value, up to any applicable statutory limit	
Personal jewelry Line from Schedule A/B: 12.1	\$200.00		\$200.00	Tenn. Code Ann. § 26-2-103
Line Holli Golleddie PVB. 12.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$8.00		\$8.00	Tenn. Code Ann. § 26-2-103
Line nom Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	

of the property and line on lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Tennessee Bank	\$3.00		\$3.00	Tenn. Code Ann. § 26-2-103
107VB			100% of fair market value, up to any applicable statutory limit	
ville TVA Employees	\$5.00		\$5.00	Tenn. Code Ann. § 26-2-103
Credit Union Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
Account through	\$106,000.00		\$106,000.00	Tenn. Code Ann. § 26-2-111(1)(D)
ule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	20-2-111(1)(0)
			any applicable statutory limit	
	Tennessee Bank Je A/B: 17.1 Eville TVA Employees Je A/B: 17.2 Account through	Tennessee Bank Je A/B: 17.1 Account through Tists this property portion you own Copy the value from Schedule A/B \$3.00 \$5.00 \$106,000.00	Tennessee Bank Je A/B: 17.1 Swille TVA Employees Jule A/B: 17.2 Account through portion you own Copy the value from Schedule A/B \$3.00 Location Schedule A/B \$3.00 Account through	Tennessee Bank Je A/B: 17.1 Strille TVA Employees Jule A/B: 17.2 Townsel 100% of fair market value, up to any applicable statutory limit Strille A/B: 17.1 Townsel 100% of fair market value, up to any applicable statutory limit Strille TVA Employees Je A/B: 17.2 Townsel 100% of fair market value, up to any applicable statutory limit Townsel 100% of fair market value, up to any applicable statutory limit Townsel 100% of fair market value, up to any applicable statutory limit Townsel 100% of fair market value, up to any applicable statutory limit Townsel 100% of fair market value, up to any applicable statutory limit

	Ouse c	J. IO BR GIZT	Main Docun	nent Page	25 of 48	3/10/00:00:00	Desc
Fill in	n this informat	tion to identify you					
Debt	or 1	Patricia Ann Es	scobar				
		First Name	Middle Name	Last Name			
Debte (Spous		First Name	Middle Name	Last Name			
Unite	d States Bankı	ruptcy Court for the	EASTERN DISTRICT OF	TENNESSEE			
Ornico	a Glatos Bariki	aptoy Court for the		12,11120022			
Case (if know	number					□ Chock	if this is an
(···· ,						led filing
O.(400D					-
	cial Form						
Scr	nedule D	: Creditors	s Who Have Clair	ns Secured	by Propert	<u>y</u>	12/15
s nee			If two married people are filing to out, number the entries, and att				
1. Do a	any creditors ha	ve claims secured b	y your property?				
	No. Check th	is box and submit t	this form to the court with your	other schedules. Yo	u have nothing else t	o report on this form.	
	Yes. Fill in al	I of the information	below.				
Part	1: List All S	Secured Claims					
			more than one secured claim, list		Column A	Column B	Column C
	as possible, list t	the claims in alphabet	s a particular claim, list the other clical order according to the creditor		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Toyota Fina Services	nciai	Describe the property that see	cures the claim:	\$25,302.00	\$19,075.00	\$6,227.00
	Creditor's Name		2016 Toyota RAV4 41,0	00 miles			
	DO Day 070	c					
	PO Box 978 Cedar Rapid	-	As of the date you file, the cla apply.	im is: Check all that			
	52409-0004		Contingent				
	Number, Street, Cit	ty, State & Zip Code	Unliquidated				
Who	owes the debt	? Check one	☐ Disputed Nature of lien. Check all that a	annly			
	ebtor 1 only	· Oncok onc.	An agreement you made (su		ıred		
	ebtor 2 only		car loan)	ich as mortgage or sect	neu		
□ De	ebtor 1 and Debto	•	☐ Statutory lien (such as tax lie				
		debtors and another	Judgment lien from a lawsuit				
	neck if this clain ommunity debt	n relates to a	Other (including a right to off	fset) Purchase N	loney Security		
Dato	debt was incurre	ad 2016	Last 4 digits of accoun	t number			
Date	uebt was illcull	eu <u>2010</u>	Last 4 digits of accoun	T Humber			
		-	Column A on this page. Write tha		\$25,30	02.00	
	is is the last pa te that number h		I the dollar value totals from all p	pages.	\$25,30	02.00	
Part	2. List Other	s to Be Notified fo	or a Debt That You Already L	istad			
			be notified about your bankrupto		already listed in Part 1	For example, if a collec	tion agency is
trying than	to collect from one creditor for	you for a debt you o	owe to someone else, list the cre it you listed in Part 1, list the add	editor in Part 1, and th	en list the collection a	gency here. Similarly, if	ou have more
	Nom - N	Chroat City Cr	7in Codo				
		, Street, City, State & ancial Servcies	ZIP COde	On which	h line in Part 1 did you e	nter the creditor? 2.1	
	Attn: Corpo	orate Officer		Last 4 di	gits of account number	_	
	6565 Heado Plano, TX 7						

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		Main Document	Page 26 of	48				
Fill	in this information to identify your case							
Deb	otor 1 Patricia Ann Escobar				•			
	First Name	Middle Name	Last Name					
	otor 2 use if, filing) First Name	Middle Name	Last Name					
(Spot	•							
Unit	ed States Bankruptcy Court for the: EA	STERN DISTRICT OF TENN	ESSEE					
Cas	e number							
(if kno	own)					Check if	this is ar	า
]	amende	d filing	
Off	icial Form 106E/F							
	hedule E/F: Creditors Who	Have Unsecured (Claims				12/1	5
iny e Sche Sche eft. <i>I</i> name	s complete and accurate as possible. Use Par executory contracts or unexpired leases that dule G: Executory Contracts and Unexpired Lule D: Creditors Who Have Claims Secured Attach the Continuation Page to this page. If ye and case number (if known).	could result in a claim. Also list Leases (Official Form 106G). Do by Property. If more space is ne ou have no information to repo	t executory contracts o not include any credito eeded, copy the Part yo	on Schedule A/B: I ors with partially s ou need, fill it out,	Property (Off secured clain number the o	ficial Form ms that are entries in	106A/B) a e listed in the boxes	and on s on the
Par								
	Do any creditors have priority unsecured clai ☐ No. Go to Part 2.	ms against you?						
	Yes.							
	List all of your priority unsecured claims. If a identify what type of claim it is. If a claim has bott possible, list the claims in alphabetical order acc Part 1. If more than one creditor holds a particula (For an explanation of each type of claim, see the	h priority and nonpriority amounts, ording to the creditor's name. If yo ar claim, list the other creditors in f	, list that claim here and sou have more than two prepart 3. Instruction booklet.)	show both priority a	and nonpriorit	ty amounts the Continu	. As much	as e of
2.1	Internal Revenue Service	Last 4 digits of account	number	\$0.00		\$0.00	amount	\$0.00
	Priority Creditor's Name Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346	on When was the debt incu	urred?	<u> </u>	-	·		
	Number Street City State Zlp Code	As of the date you file, t	the claim is: Check all th	nat apply				
	Who incurred the debt? Check one.	☐ Contingent						
	■ Debtor 1 only	☐ Unliquidated						
	☐ Debtor 2 only	☐ Disputed						
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsec	cured claim:					
	☐ At least one of the debtors and another	☐ Domestic support obliq	gations					
	☐ Check if this claim is for a community d	ebt Taxes and certain other	er debts you owe the go	vernment				
	Is the claim subject to offset?	Claims for death or pe	ersonal injury while you w	vere intoxicated				
	■ No	Other. Specify						
	Yes		ice Only					
Pari	t 2: List All of Your NONPRIORITY Un	secured Claims						
	Do any creditors have nonpriority unsecured							
	□ No. You have nothing to report in this part. So	,	our other schedules.					
	Yes.							
	List all of your nonpriority unsecured claims unsecured claim, list the creditor separately for e							more

unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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Debtor 1 Patricia Ann Escobar Case number (if know) \$500.00 4.1 Advance America Last 4 digits of account number Nonpriority Creditor's Name 4560 Chapman Hwy When was the debt incurred? 2017 Knoxville, TN 37920 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Personal Loan Other. Specify 4.2 \$466.00 Cash Express Last 4 digits of account number Nonpriority Creditor's Name 10718 Chapman Higway When was the debt incurred? 2017 Seymour, TN 37865 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Personal Loan** Other. Specify 4.3 Clark & Washington LLC Last 4 digits of account number \$0.00 Nonpriority Creditor's Name 3300 Northeast Expressway When was the debt incurred? Bldg 3 Ste A Atlanta, GA 30341 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Only ☐ Yes

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Page 28 of 48 Case number (if know) Main Document Debtor 1 Patricia Ann Escobar 4.4 Comenity Bank/Catherines Last 4 digits of account number \$242.00 Nonpriority Creditor's Name PO Box 182272 When was the debt incurred? 2017 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.5 \$500.00 **Easy Money** Last 4 digits of account number Nonpriority Creditor's Name 4420 Chapman Hwy. When was the debt incurred? 2017 Knoxville, TN 37920 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Personal Loan** Other. Specify 4.6 First Heritage Credit Last 4 digits of account number \$3,756.00 Nonpriority Creditor's Name 5022 Clinton Hwy When was the debt incurred? 2017 Knoxville, TN 37912 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Personal Loan ☐ Yes

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Debtor 1 Patricia Ann Escobar Case number (if know) \$76.00 4.7 Franklin Collections Service, Inc Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 3910 When was the debt incurred? 2014 Tupelo, MS 38803-3910 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections (multiple accounts) ☐ Yes **Knoxville Red Light Enforcement** \$0.00 4.8 **Program** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Department 888565 Knoxville, TN 37995-8565 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Only ☐ Yes 4.9 OneMain Last 4 digits of account number \$1,544.00 Nonpriority Creditor's Name PO Box 1010 When was the debt incurred? 2017 Evansville, IN 47706 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Personal Loan

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Security Finance	Last 4 digits of account number	\$880.0
Nonpriority Creditor's Name		
PO Box 3146 Spartanburg, SC 29304-3146	When was the debt incurred? 2017	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Personal Loan	
Sevier County Ambulance Service	Last 4 digits of account number	\$830.
Nonpriority Creditor's Name		
PO Box 9150	When was the debt incurred? 2017	
Paducah, KY 42002 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	To or the date you me, the stand of book an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical	
Speedy Cash	Last 4 digits of account number	\$1,100
Nonpriority Creditor's Name		· ·
7730 W 33rd Street N, Suite 118	When was the debt incurred? 2017	
Wichita, KS 67205 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	and Jan 1, and a constant and apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Personal Loan	

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Summit Medical Group PLLC Nonpriority Creditor's Name	Last 4 digits of account number	\$623.
Department 888073	When was the debt incurred? 2017	
Knoxville, TN 37995 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
SYNCB/Care Credit	Last 4 digits of account number	\$385
Nonpriority Creditor's Name		
PO Box 965036 Orlando, FL 32896-5036	When was the debt incurred? 2016	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Credit Card	
SYNCB/ToysRUs		\$351
Nonpriority Creditor's Name	Last 4 digits of account number	φ 33 1
PO Box 965036	When was the debt incurred? 2017	
Orlando, FL 32896	=	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	Пол	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt		
ls the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
* * *		

Dahtan	Case 3:18-bk-31272-SHB	Doc 1 Filed 04/25/18 Entered 04/25/18 08:30:33 Main Document Page 32 of 48 Case number (if know)	Desc
Deptor 1	Patricia Ann Escobar	Case number (if know)	
ן סן	SYNCB/Walmart	Last 4 digits of account number	\$1,368.00
	Nonpriority Creditor's Name PO Box 965036 Orlando, FL 32896	When was the debt incurred? 2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	
	University Health Systems	Last 4 digits of account number	\$971.43
	Nonpriority Creditor's Name c/o Laura T. Weber PO Box 51272	When was the debt incurred? 2018	
	Knoxville, TN 37920-1272 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify Lawsuit Docket No. 1080504H	
1 · 1	World Finance Co.	Last 4 digits of account number	\$2,310.00
	Nonpriority Creditor's Name 108 Frederick Street Greenville, SC 29607-2532	When was the debt incurred? 2017	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
,	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	

Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify Personal Loan

Type of NONPRIORITY unsecured claim:

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

debt

■ No

☐ Yes

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Patricia Ann Escobar		Case number (if know)			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
Allied Interstate LLC	Line 4.16 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
PO Box 361445		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Columbus, OH 43236	Last 4 digits of account numb	er			
Name and Address	On which entry in Part 1 or Pa	art 2 did you list the original creditor?			
Encore Receivable Management	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
400 N. Rogers Road PO Box 3330 Olathe, KS 66063-3330		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Claims, No course cour	Last 4 digits of account numb	er			
Name and Address	On which entry in Part 1 or Pa	art 2 did you list the original creditor?			
Knox County General Sessions	Line 4.17 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims			
Court Attn Wanda		■ Part 2: Creditors with Nonpriority Unsecured Claims			
300 Main Street Room 318 Knoxville, TN 37902					
Kiloxville, 114 37 302	Last 4 digits of account numb	er			
Name and Address	On which entry in Part 1 or Pa	art 2 did you list the original creditor?			
United States Attorney's Office	Line 2.1 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims			
Howard H. Baker Jr. U.S. Courthouse		☐ Part 2: Creditors with Nonpriority Unsecured Claims			
800 Market Street, Suite 211 Knoxville, TN 37902					
	Last 4 digits of account numb	er			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Т	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	15,903.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	15,903.00

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		Main Data			
Fill in this information to identify your case:					
Debtor 1	Patricia Ann Esc	obar			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT C	FTENNESSEE		
Case number					
(if known)					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	

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		Main Docum	ent Page 35	of 48	
Fill in this	information to identify your	case:			
Debtor 1	Patricia Ann Esc	obar			
.	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT OF	TENNESSEE		
Case num (if known)	ber				☐ Check if this is an amended filing
Officia	ll Form 106H				
	dule H: Your Cod	ebtors			12/15
<u> </u>	die II. Tour ood	CDtOIS			1213
people are fill it out, a your name	s are people or entities who a e filing together, both are equ and number the entries in the e and case number (if known) you have any codebtors? (If	ally responsible for supplyi boxes on the left. Attach th Answer every question.	ing correct information ne Additional Page to	on. If more space is need this page. On the top of	ded, copy the Additional Page,
=					
■ No □ Ye					
				• (0)	
	thin the last 8 years, have you na, California, Idaho, Louisiana				ates and territories include
	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live w	ith you at the time?		
in line Form	e 2 again as a codebtor only i	f that person is a guarantor	or cosigner. Make si	ure you have listed the o	rith you. List the person shown creditor on Schedule D (Official hedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The credit Check all schedules the	or to whom you owe the debt hat apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line☐ Schedule G, line☐	
	Number Street			-	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
<u></u>	Name			☐ Schedule E/F, line ☐ Schedule G, line	
	Number Street			. Ochloddie O, iirle	

State

City

ZIP Code

Fill	in this information to identify your c	ase:		
Del	otor 1 Patricia Ann	n Escobar		
	otor 2			
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF TENNESSEE	
	se number 		-	Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date:
0	fficial Form 106I			MM / DD/ YYYY
S	chedule I: Your Inc	ome		12/15
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
Pai	t 1: Describe Employment			
	information. If you have more than one job,		■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Inventory Control	
	Include part-time, seasonal, or self-employed work.	Employer's name	Veritiv Operating Company	
	Occupation may include student or homemaker, if it applies.	Employer's address	1000 Abernathy Road NE Building 400, Ste. 1700 Atlanta, GA 30328	
		How long employed t	here? 36 years	
Pai	t 2: Give Details About Mo	nthly Income		
		-	you have nothing to report for any lin	e, write \$0 in the space. Include your non-filing
•	u or your non-filing spouse have m		ombine the information for all employ	ers for that person on the lines below. If you need

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. Calculate gross Income. Add line 2 + line 3.

		For Debtor 1	Debtor 2 or filing spouse	
2.	\$	3,826.34	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$	3,826.34	\$_	0.00

Debto	/r 1	Patricia Ann Escobar		C	Case number (if kn	own)				
	Cor	ny line 4 hore	4.		For Debtor 1	24		Debtor 2 -filing s _l	pouse	
	Cop	by line 4 here	4.		\$3,826	.34	Φ_		0.00	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a		\$ 628		\$		0.00	_
	5b.	Mandatory contributions for retirement plans	5b			.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c		\$ 191		\$_		0.00	_
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d 5e		\$ 541 \$ 211		\$		0.00	_
	5f.	Domestic support obligations	5f.			.00	ς \$		0.00	_
	5g.	Union dues	5g		·	.00	\$_		0.00	_
	5h.	Other deductions. Specify: HSA	5h			.00	+ \$		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$ 1,672	.92	\$		0.00	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ 2,153		\$		0.00	-
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				<u> </u>	·		- 0.00	-
		monthly net income.	8a	١.	\$ 0	.00	\$		0.00	
	8b.	Interest and dividends	8b).	\$ 0	.00	\$		0.00	_
	8c. 8d. 8e.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security	8c 8d 8e	l.	\$ 0	0.00	\$ \$ \$		0.00 0.00 0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$0	.00	\$		0.00	_
	8g.	Pension or retirement income	8g			.00	\$		0.00	_
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$0	.00	+ \$		0.00	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0	.00	\$		0.0	0
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	2,153.42	+ \$		0.00	= \$	2,153.42
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,					,
	Incluothe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe					Schedule 11.		0.00
		If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certain lies						12.	\$	2,153.42
13.	Do <u>'</u>	you expect an increase or decrease within the year after you file this form	?						Combi monthl	ned y income
		No.								
		Yes. Explain: Debtor's income is based on salary. Debtor has anticipate receiving it going forward.	rece	eive	ed overtime s	o far	this y	∕ear, bu	ıt does	not

	in this informe	ation to identify yo	our caea:			Ī		
						<u>.</u>		
Deb	tor 1	Patricia Ann	Escobar	•			t if this is: An amended filing	
Deb	tor 2					_	ū	ving postpetition chapter
(Spc	ouse, if filing)					1	3 expenses as of	the following date:
Unite	ed States Bank	ruptcy Court for the	: EASTE	RN DISTRICT OF TENNE	SSEE		MM / DD / YYYY	
	e number nown)							
Of	ficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	nses				12/15
Be a	as complete ormation. If m nber (if know	and accurate as	s possible eded, atta ry questio	. If two married people ar ch another sheet to this				
1.	Is this a join		iloiu					
	■ No. Go to		in a separ	ate household?				
	□Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Debto	or 2.	
2.	Do vou hav	e dependents?	■ No					
	Do not list D Debtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						Yes
								□ No □ Yes
								☐ Yes
								☐ Yes
								□ No
_	Da		_					☐ Yes
3.	expenses o	oenses include f people other t d your depende	han $_{oldsymbol{\square}}$	No Yes				
Part	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses				
exp	imate your ex enses as of a licable date.	xpenses as of your date after the l	our bankri bankruptc	uptcy filing date unless y y is filed. If this is a supp	ou are using this followed and use of the second se	orm as a sup J, check the	plement in a Cha box at the top o	opter 13 case to report f the form and fill in the
Incl	ude expense	s paid for with	non-cash	government assistance i	f you know			
	value of suc icial Form 10		d have inc	cluded it on Schedule I: \	our Income		Your exp	enses
4.		or home owners		ses for your residence. I	nclude first mortgag	e 4. \$		600.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner's	s, or renter	's insurance		4b. \$		0.00
				upkeep expenses		4c. \$		0.00
5		owner's associat			mo oquity loose	4d. \$		0.00
5.	Auditional I	nortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

er	otor 1 Patricia Ann Escobar	Case num	ber (if known)	
3.	Utilities:			
Ο.	6a. Electricity, heat, natural gas	6a.	\$	0.00
	6b. Water, sewer, garbage collection	6b.	·	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		55.00
	6d. Other. Specify:	6d.	·	0.00
	Food and housekeeping supplies	— 7.	\$	403.00
	Childcare and children's education costs	8.	\$	0.00
·	Clothing, laundry, and dry cleaning	9.	\$	25.00
	Personal care products and services	10.	\$	25.00
	Medical and dental expenses	11.		85.00
	Transportation. Include gas, maintenance, bus or train fare.		Ψ	03.00
	Do not include car payments.	12.	\$	175.00
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	25.00
	Charitable contributions and religious donations	14.	\$	0.00
5.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	153.00
	15d. Other insurance. Specify:	15d.	\$	0.00
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.	\$	0.00
7.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	*	0.00
	17b. Car payments for Vehicle 2	17b.	·	0.00
	17c. Other. Specify:	17c.	· -	0.00
	17d. Other. Specify:	17d.	\$	0.00
8.	Your payments of alimony, maintenance, and support that you did not report as	10	\$	0.00
^	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	
9.	Other payments you make to support others who do not live with you.	19.	Ф	0.00
1	Specify: Other real property expenses not included in lines 4 or 5 of this form or on Sched		ur Incomo	
J.	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	·	0.00
	20c. Property, homeowner's, or renter's insurance	20b. 20c.	*	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	20e. Homeowner's association or condominium dues	20d. 20e.	·	0.00
1		206.	·	
١.	Other: Specify: Vehicle Tags		· <u> </u>	7.00
	Pet Expense		+\$	20.00
2.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	1,573.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$,
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	1,573.00
	, , ,			1,070.00
3.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	2,153.42
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	1,573.00
	23c. Subtract your monthly expenses from your monthly income.	224	¢	580.42
	The result is your <i>monthly net income</i> .	23c.	\$	J00.4Z

☐ Yes.

Explain here: Debtor lives with her mother, and they do not commingle funds. Debtor's rent payment to mother covers utilities; Debtor also buys groceries for both herself and her mother.

Fill in this	s information to identify your	case:			
Debtor 1 Patricia Ann Escobar					
	First Name	Middle Name	Last Name		
Debtor 2	Earl Name	Middle Nesse	LastNama		
(Spouse if, fil	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT	OF TENNESSEE		
Case num	nber				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106Dec				
		an Individua	l Dobtorio Co	hadulaa	
Decia	aration About a	an individua	i Deptor S Sc	nedules	12/15
, ,	ooth. 18 U.S.C. §§ 152, 1341,	,			
Did :	you pay or agree to pay some	eone who is NOT an atto	orney to help you fill out b	ankruptcy forms?	
	No				
	Yes. Name of person				ptcy Petition Preparer's Notice,
				Declaration, a	nd Signature (Official Form 119)
	r penalty of perjury, I declare hey are true and correct.	that I have read the sur	nmary and schedules filed	d with this declaration	and
X /	s/ Patricia Ann Escobar		X		
	Patricia Ann Escobar		Signature of	Debtor 2	
5	Signature of Debtor 1		-		
	Date April 23, 2018		Date		
	<u>p ==, ==</u>				

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Tennessee

In re	Patricia Ann Escobar	Case No.		
		Debtor(s)	_ Chapter	13

VERIFICATION OF CREDITOR MATRIX

The above Debtor(s) hereby verifies under the penalty of perjury under the laws of the United States of America that the attached list of creditors is true and correct to the best of his/her knowledge.

Date:	April 23, 2018	/s/ Patricia Ann Escobar	
		Patricia Ann Escobar	
		Signature of Debtor	
Date:	April 23, 2018	/s/ Zachary S. Burroughs	
		/s/ David R. Houbre	
		Signature of Attorney	
		Zachary S. Burroughs 025896	
		David R. Houbre 029221	
		Clark & Washington, L.L.C.	
		408 S. Northshore Drive	
		Knoxville, TN 37919	
		865-281-8084 Fax: 865-862-8967	

Advance America 4560 Chapman Hwy Knoxville, TN 37920

Allied Interstate LLC PO Box 361445 Columbus, OH 43236

Cash Express 10718 Chapman Higway Seymour, TN 37865

Clark & Washington LLC 3300 Northeast Expressway Bldg 3 Ste A Atlanta, GA 30341

Comenity Bank/Catherines PO Box 182272 Columbus, OH 43218

Easy Money 4420 Chapman Hwy. Knoxville, TN 37920

Encore Receivable Management 400 N. Rogers Road PO Box 3330 Olathe, KS 66063-3330

First Heritage Credit 5022 Clinton Hwy Knoxville, TN 37912

Franklin Collections Service, Inc P.O. Box 3910 Tupelo, MS 38803-3910

Internal Revenue Service Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346 Knox County General Sessions Court
Attn Wanda
300 Main Street Room 318
Knoxville, TN 37902

Knoxville Red Light Enforcement Program Department 888565 Knoxville, TN 37995-8565

OneMain PO Box 1010 Evansville, IN 47706

Security Finance PO Box 3146 Spartanburg, SC 29304-3146

Sevier County Ambulance Service PO Box 9150 Paducah, KY 42002

Speedy Cash 7730 W 33rd Street N, Suite 118 Wichita, KS 67205

Summit Medical Group PLLC Department 888073 Knoxville, TN 37995

SYNCB/Care Credit PO Box 965036 Orlando, FL 32896-5036

SYNCB/ToysRUs PO Box 965036 Orlando, FL 32896

SYNCB/Walmart PO Box 965036 Orlando, FL 32896

Toyota Financial Servcies Attn: Corporate Officer 6565 Headquarters Dr. Plano, TX 75024 Toyota Financial Services PO Box 9786 Cedar Rapids, IA 52409-0004

United States Attorney's Office Howard H. Baker Jr. U.S. Courthouse 800 Market Street, Suite 211 Knoxville, TN 37902

University Health Systems c/o Laura T. Weber PO Box 51272 Knoxville, TN 37920-1272

World Finance Co. 108 Frederick Street Greenville, SC 29607-2532